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|-----------------------------------------------------------------|------------------------------------------|-----------------------------|-----------------------------------------------|
| TRANSMITTAL FORM | | Application Number | 10/518,103 |
| | | Filing Date | (Int'l) June 18, 2003 |
| | | First Named Inventor | Andrej BUGRIM |
| | | Art Unit | 1631 |
| | | Examiner Name | Karlheinz R. Skowronek |
| <i>(to be used for all correspondence after initial filing)</i> | Total Number of Pages in This Submission | 16 + exhibits | Attorney Docket Number 655202000300 |

| ENCLOSURES (Check all that apply) | | | | |
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| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (14 pages) with Exhibits A through D <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Remarks</td> <td>Customer No. 25225</td> </tr> </table> | | | Remarks | Customer No. 25225 |
| Remarks | Customer No. 25225 | | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|---------------------------------------------------|-------------------------|-----------------|--------|
| Firm Name | MORRISON & FOERSTER LLP | | |
| Signature | /Yan Leychkis/ | | |
| Printed name | Yan Leychkis | | |
| Date | October 8, 2009 | Reg. No. | 60,440 |